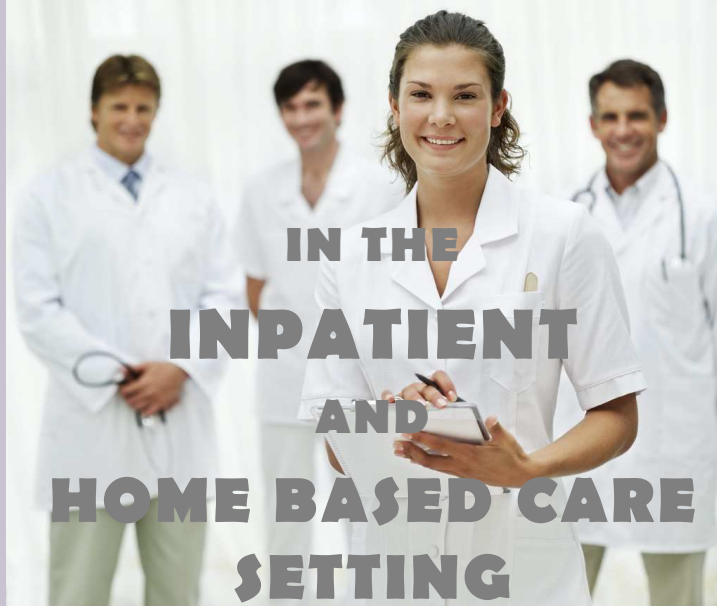


VA Medical Center

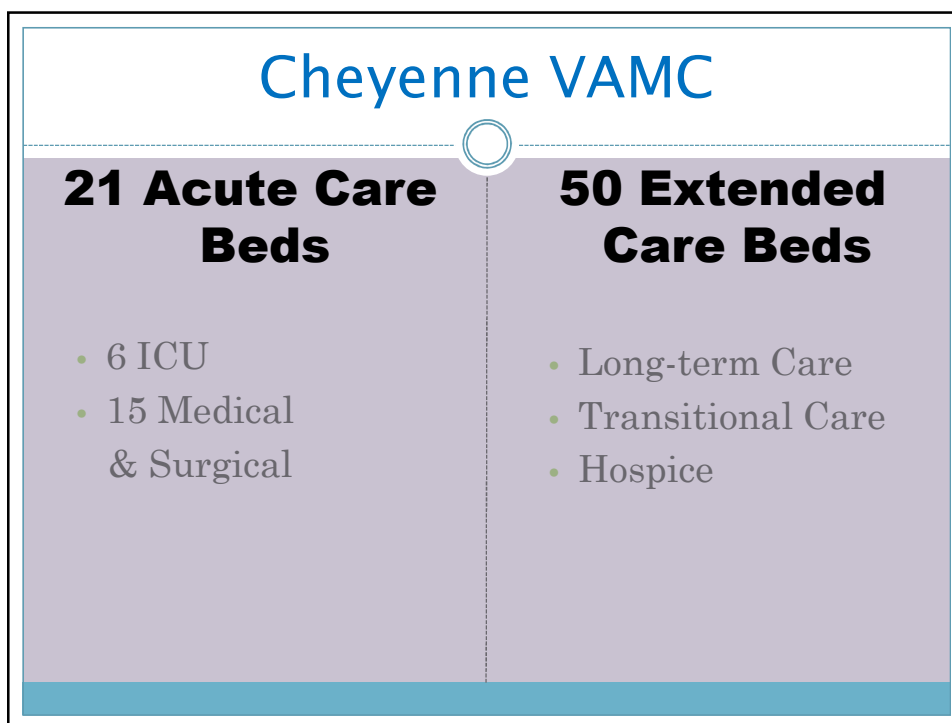


Cheyenne Wyoming

Fall Reduction Program



**IN THE
INPATIENT
AND
HOME BASED CARE
SETTING**





2003

Patient Personal Freedoms and Security

Fall Prevention
and Management Toolkit

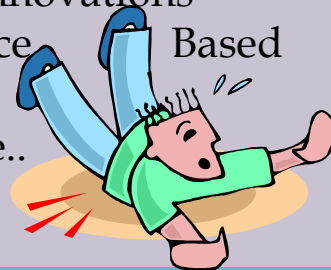
vaww.ncps.va.gov

Fall Prevention Program Initiatives

- Valid and reliable way to collect fall data maximizing VA electronic patient record system
- Simple design that will not add to staff workload
- Provide for systematic review and evaluation in a multidisciplinary collaboration
 - Retrospective
 - Concurrent

National Recognition as Best Practice

The Cheyenne VAMC Fall Prevention Program was selected as one of the top ten interdisciplinary team projects throughout the entire VA system in 2007 by the VA Office of Nursing Services Innovations Award Program for Evidence Based Practice: Improving Patient Outcomes and Nursing Care..



Definition of a Fall

Loss of upright position that results in landing on the floor, ground or an object or furniture or a sudden, uncontrolled, unintentional, non-purposeful, downward displacement of the body to the floor or other objects.

* This excludes falls resulting from violent blows or other purposeful actions.

Data transmitted
to Fall Team Coordinator
electronically



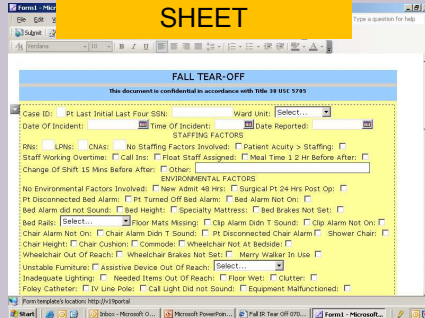
ELECTRONIC DOCUMENTATION

CPRS HEALTH SYSTEMS FALL NOTE

- STANDARD TITLE: FALL RISK ASSESSMENT NOTE
- DATE OF NOTE: JUN 21, 2007@10:26 ENTRY DATE: JUN 21, 2007@10:26:19
- LOCAL TITLE: HEALTH SYSTEMS FALL NOTE
- AUTHOR: PRIMAK, KARRI E EXP COSIGNER:
- URGENCY: STATUS: COMPLETED
- Post-fall Nursing Note
- Date/time of fall: jun 21, 2007@09:00
- Unit where fall occurred: NHCU
- Discovered by (if nursing staff, please add as co-signer): Donald Duck
- Was Mr/Ms ZDDUCK assisted by staff to prevent injury? NO

INFOPATH FALL REPORT SHEET

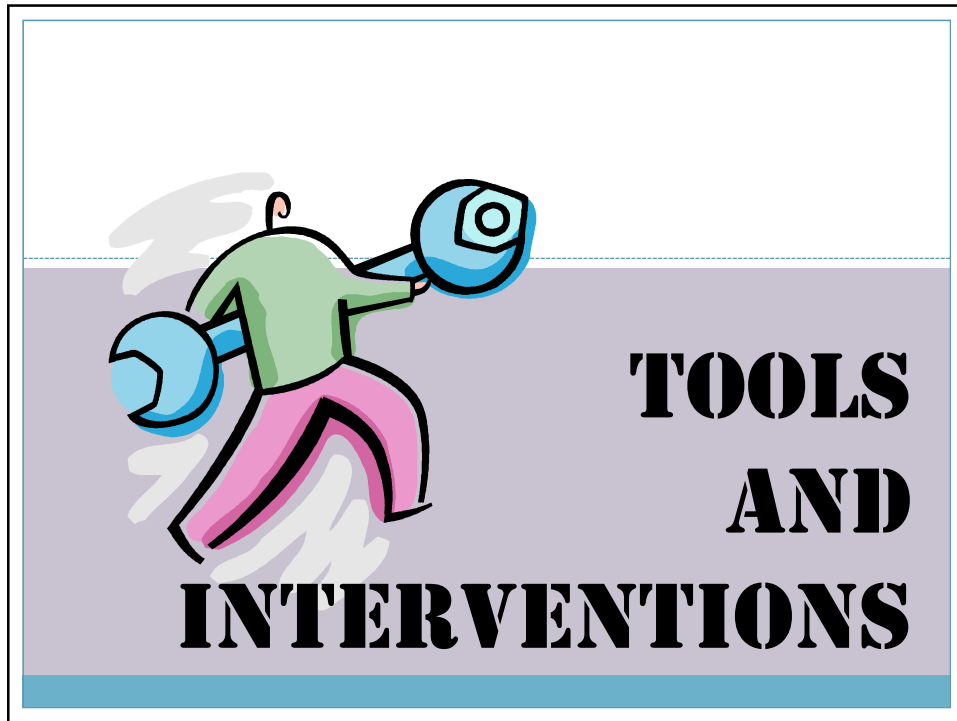
PS



The screenshot shows a 'FALL TEAR-OFF' form with the following sections:

- Case ID:** P1 Last Initial Last Four SSN: Ward Unit: Select...
- Date Of Incident:** Time Of Incident: Date Reported: [dropdown]
- STAFFING FACTORS:**
 - RNS: LPNC: CHKS: No Staffing Factors Involved: ☐ Patient Acuity > Staffing: ☐
 - Staff Working Overtime: ☐ Call In: ☐ Float Staff Assigned: ☐ Meal Time 1/2 Hr Before After: ☐
 - Change Of Shift 1/2 Hr Before After: ☐ Other: ☐
- ENVIRONMENTAL FACTORS:**
 - No Environmental Factors Involved: ☐ New Adult 40 Hrs: ☐ Surgical Pt 24 Hrs Post Op: ☐
 - Pt Disconnected Bed Alarm: ☐ Pt Turned Off Bed Alarm: ☐ Bed Alarm Not On: ☐
 - Bed Alarm did not Sound: ☐ Bed Height: ☐ Specialty Mattress: ☐ Bed Brakes Not Set: ☐
 - Bed Rails: ☐ Floor Mats Missing: ☐ Clip Alarm Didn't Sound: ☐ Clip Alarm Not On: ☐
 - Chair Alarm Not On: ☐ Chair Alarm Didn't Sound: ☐ Pt Disconnected Chair Alarm: ☐ Shower Chair: ☐
 - Char Height: ☐ Chair Cushion: ☐ Wheelchair Not At Bedside: ☐
 - Wheelchair Out Of Reach: ☐ Wheelchair Brakes Not Set: ☐ Merry Walker In Use: ☐
 - Unstable Furniture: ☐ Assistive Device Out Of Reach: ☐
 - Inadequate Lighting: ☐ Needed Items Out Of Reach: ☐ Floor Wet: ☐ Clutter: ☐
 - Foley catheter: ☐ IV Line Pole: ☐ Call Light Did not Sound: ☐ Equipment Malfunctioned: ☐





THERAPEUTIC RECREATION

Therapeutic Recreation is the provision of treatment services and recreation services to person with illnesses or disabling conditions.

- The primary purpose of treatment services which is often referred to as recreation therapy, is to restore, remediate, or rehabilitate in order to improve functioning and independence as well as to reduce or eliminate the effects of illness or disability.
- The primary purpose of recreation therapy services is to provide recreation resources and opportunities in order to improve health and well-being. Therapeutic recreation is provided by professionals who are trained and certified (CTRS) to provide Therapeutic Recreation”.

ATRA 1997

Restorative Nursing Program



Fall Prevention Tools



Fall Team Data Aggregated

- EACH INDIVIDUAL FALL IS REVIEWED AND EVALUATED FOR OVER 92 DIFFERENT FACTORS.
- FALL DATA IS THEN AGGREGATED FOR USE BY FALL TEAM AND UNIT STAFF AT SELECTED TIME FRAMES.

Monthly
Quarterly
Year end

Data is then Trended using Aggregated Information



Outcomes



Falls on Medical & Surgical Units

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Ma y	Jun	Jul	Aug	Sep	Yr End
FY08	3	1	1	2	1	5	0	3	7	0	5	4	32
FY07	3	0	6	4	1	0	2	4	2	3	4	2	32
FY06	6	2	7	1	8	9	8	2	4	2	0	6	55

2007 - Fall prevention efforts on the Medical and Surgical wards resulted in 42% decrease in number of falls compared to same period last fiscal year.

2008 – Maintained same number of falls compared to same period last fiscal year.



Outcomes



• Falls on Extended Care Unit

	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Ma y	Jun	Jul	Aug	Sep	Yr End
FY08	3	9	5	4	11	11	2	7	3	7	3	6	71
FY07	6	6	20	13	6	7	9	4	10	7	5	3	96
FY06	9	8	18	5	4	13	5	15	5	5	6	7	100

2008 - Fall prevention efforts on the Extended Care Unit resulted in 26% decrease in number of falls compared to same period last fiscal year.

2007 - Fall prevention efforts on the Extended Care Unit resulted in 4% decrease in number of falls compared to same period last fiscal year.

